

Exhibit B
Nevada Certified Corporate Registration
Documents

BARBARA K. CEGAVSKE
Secretary of State

STATE OF NEVADA



KIMBERLEY PERONDI
Deputy Secretary for
Commercial Recordings

OFFICE OF THE
SECRETARY OF STATE

Commercial Recordings Division

202 N. Carson Street
Carson City, NV 89701
Telephone (775) 684-5708
Fax (775) 684-7138

North Las Vegas City Hall
2250 Las Vegas Blvd North, Suite 400
North Las Vegas, NV 89030
Telephone (702) 486-2880
Fax (702) 486-2888

Certified Copy

11/25/2020 08:42:54 AM

Work Order Number: W2020112500322 - 960167
Reference Number: 20201062032
Through Date: 11/25/2020 08:42:54 AM
Corporate Name: BEDROCK PROTECTION
AGENCY LLC

The undersigned filing officer hereby certifies that the attached copies are true and exact copies of all requested statements and related subsequent documentation filed with the Secretary of State's Office, Commercial Recordings Division listed on the attached report.

Document Number	Description	Number of Pages
20200697356	Annual List - 06/01/2020	2
20190227294-58	Annual List - 05/28/2019	1
20180288903-91	Annual List - 06/28/2018	1
20170234334-59	Annual List - 05/31/2017	1
20160149687-84	Annual List - 04/01/2016	1
20150324665-24	Initial List - 07/16/2015	1
20150289840-99	Registration – Foreign LLC - 06/25/2015	2



Respectfully,

BARBARA K. CEGAVSKE
Nevada Secretary of State

Certified By: Electronically Certified

BARBARA K. CEGAVSKE
Secretary of State

KIMBERLEY PERONDI
*Deputy Secretary for
Commercial Recordings*

STATE OF NEVADA



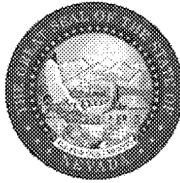
**OFFICE OF THE
SECRETARY OF STATE**

Commercial Recordings Division
202 N. Carson Street
Carson City, NV 89701
Telephone (775) 684-5708
Fax (775) 684-7138

North Las Vegas City Hall
2250 Las Vegas Blvd North, Suite 400
North Las Vegas, NV 89030
Telephone (702) 486-2880
Fax (702) 486-2888

Certificate Number: B202011251234657

You may verify this certificate
online at <http://www.nvsos.gov>



BARBARA K. CEGAVSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov
www.nvsilverflume.gov

Annual or Amended List and State Business License Application

ANNUAL AMENDED (check one)

List of Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers:

BEDROCK PROTECTION AGENCY LLC

NAME OF ENTITY

NV20151395300

Entity or Nevada Business
Identification Number (NVID)

TYPE OR PRINT ONLY - USE DARK INK ONLY - DO NOT HIGHLIGHT

IMPORTANT: Read instructions before completing and returning this form.

Please indicate the entity type (check only one):

Corporation
 This corporation is publicly traded, the Central Index Key number is:

Nonprofit Corporation (see nonprofit sections below)

Limited-Liability Company

Limited Partnership

Limited-Liability Partnership

Limited-Liability Limited Partnership

Business Trust

Corporation Sole

Filed in the Office of <i>Barbara K. Cegavske</i>	Business Number E0314582015-8
	Filing Number 20200697356
Secretary of State State Of Nevada	Filed On 06/01/2020 07:48:33 AM
	Number of Pages 2

Additional Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers, may be listed on a supplemental page.

CHECK ONLY IF APPLICABLE

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee.

001 - Governmental Entity
 006 - NRS 680B.020 Insurance Co, provide license or certificate of authority number

For nonprofit entities formed under NRS chapter 80: entities without 501(c) nonprofit designation are required to maintain a state business license, the fee is \$200.00. Those claiming an exemption under 501(c) designation must indicate by checking box below.

Pursuant to NRS Chapter 76, this entity is a 501(c) nonprofit entity and is exempt from the business license fee.
 Exemption Code 002

For nonprofit entities formed under NRS Chapter 81: entities which are Unit-owners' association or Religious, Charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C. § 501(c) are excluded from the requirement to obtain a state business license. Please indicate below if this entity falls under one of these categories by marking the appropriate box. If the entity does not fall under either of these categories please submit \$200.00 for the state business license.

Unit-owners' Association Religious, charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C. § 501(c)

For nonprofit entities formed under NRS Chapter 82 and 80: Charitable Solicitation Information - check applicable box

Does the Organization intend to solicit charitable or tax deductible contributions?

No - no additional form is required
 Yes - the "Charitable Solicitation Registration Statement" is required.
 The Organization claims exemption pursuant to NRS 82A.210 - the "Exemption From Charitable Solicitation Registration Statement" is required

****Failure to include the required statement form will result in rejection of the filing and could result in late fees.****



BARBARA K. CEGAVSKE
Secretary of State
202 North Carson Street
Carson City, Nevada 89701-4201
(775) 684-5708
Website: www.nvsos.gov
www.nvsilverflume.gov

Annual or Amended List and State Business License Application - Continued

Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers:

CORPORATION, INDICATE THE MANAGING MEMBER:

Paul Nelson

Name

[REDACTED]

Address

USA

Country

Cottonwood Heights

City

UT

State

Zip/Postal Code

None of the officers and directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

Paul J Nelson

Signature of Officer, Manager, Managing Member,
General Partner, Managing Partner, Trustee,
Subscriber, Member, Owner of Business,
Partner or Authorized Signer FORM WILL BE RETURNED IF

UNSGNED

Managing Member

Title

06/01/2020

Date

INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE BUSINESS LICENSE APPLICATION OF:

BEDROCK PROTECTION AGENCY LLC

NAME OF LIMITED-LIABILITY COMPANY

ENTITY NUMBER

E0314582015-8

FOR THE FILING PERIOD OF TO

USE BLACK INK ONLY - DO NOT HIGHLIGHT

****YOU MAY FILE THIS FORM ONLINE AT www.nvsilverflume.gov****

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all manager or managing members. A **Manager**, or if none, a **Managing Member** of the LLC must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional managers or managing members, attach a list of them to this form.
3. Return completed form with the fee of \$150.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A **copy fee of \$2.00 per page** is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

ANNUAL LIST FILING FEE: \$150.00 LATE PENALTY: \$75.00 (if filing late)

BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late)

Filed in the Office of <i>Barbara K. Cognate</i>	Business Number E0314582015-8
	Filing Number 20190227294-58
Secretary of State	Filed On 05/28/2019
State Of Nevada	Number of Pages 1

(This document was filed electronically.)
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW****NRS 76.020 Exemption Codes**

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

001 - Governmental Entit
006 - NRS 680B.020 Insurance Co.**NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**

NAME

PAUL J NELSON

ADDRESS

MANAGER OR MANAGING MEMBER

CITY

SALT LAKE CITY

STATE

UT

ZIP CODE

NAME

MANAGER OR MANAGING MEMBER

CITY

STATE

ZIP CODE

NAME

MANAGER OR MANAGING MEMBER

CITY

STATE

ZIP CODE

NAME

MANAGER OR MANAGING MEMBER

CITY

STATE

ZIP CODE

None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

 PAUL J NELSON

Title

CEO

Date

5/28/2019 11:31:58 AM

Signature of Manager, Managing Member or Other Authorized SignatureNevada Secretary of State List ManorMem
Revised: 7-1-17

SDKD-NSS-000000000002

INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE BUSINESS LICENSE APPLICATION OF:

BEDROCK PROTECTION AGENCY LLC

NAME OF LIMITED-LIABILITY COMPANY

ENTITY NUMBER

E0314582015-8

FOR THE FILING PERIOD OF TO

USE BLACK INK ONLY - DO NOT HIGHLIGHT

****YOU MAY FILE THIS FORM ONLINE AT www.nvsilverflume.gov****

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all manager or managing members. A **Manager**, or if none, a **Managing Member** of the LLC must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional managers or managing members, attach a list of them to this form.
3. Return completed form with the fee of \$150.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A **copy fee of \$2.00 per page** is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

ANNUAL LIST FILING FEE: \$150.00 LATE PENALTY: \$75.00 (if filing late)

BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late)

Filed in the Office of <i>Barbara K. Cognate</i>	Business Number E0314582015-8
	Filing Number 20180288903-91
Secretary of State	Filed On 06/28/2018
State Of Nevada	Number of Pages 1

(This document was filed electronically.)
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW****NRS 76.020 Exemption Codes**

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

001 - Governmental Entit
006 - NRS 680B.020 Insurance Co.**NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**

NAME

PAUL J NELSON

ADDRESS

MANAGER OR MANAGING MEMBER

CITY

SALT LAKE CITY

STATE

UT

ZIP CODE

NAME

MANAGER OR MANAGING MEMBER

CITY

STATE

ZIP CODE

ADDRESS

NAME

MANAGER OR MANAGING MEMBER

CITY

STATE

ZIP CODE

ADDRESS

NAME

MANAGER OR MANAGING MEMBER

CITY

STATE

ZIP CODE

ADDRESS

None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

 PAUL J NELSON

Title

CEO

Date

6/28/2018 8:13:26 AM

Signature of Manager, Managing Member or Other Authorized SignatureNevada Secretary of State List ManorMem
Revised: 7-1-17

SDKD-NSS-000000000002

INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE BUSINESS LICENSE APPLICATION OF:

BEDROCK PROTECTION AGENCY LLC

NAME OF LIMITED-LIABILITY COMPANY

ENTITY NUMBER

E0314582015-8

FOR THE FILING PERIOD OF JUN, 2017 TO JUN, 2018

100463

USE BLACK INK ONLY - DO NOT HIGHLIGHT

YOU MAY FILE THIS FORM ONLINE AT www.nvsilverflume.gov Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all manager or managing members. A Manager, or if none, a Managing Member of the LLC must sign the form. FORM WILL BE RETURNED IF UNSIGNED.

2. If there are additional managers or managing members, attach a list of them to this form.

3. Return completed form with the fee of \$150.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5. Make your check payable to the Secretary of State.

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7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.

8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

ANNUAL LIST FILING FEE: \$150.00 LATE PENALTY: \$75.00 (if filing late)

BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late)

Filed in the Office of <i>Barbara K. Cigarske</i>	Business Number E0314582015-8
	Filing Number 20170234334-59
Secretary of State State Of Nevada	Filed On 05/31/2017
	Number of Pages 1

(This document was filed electronically.)
ABOVE SPACE IS FOR OFFICE USE ONLY

CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW

NRS 76.020 Exemption Codes

 Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

NAME
PAUL J NELSON

MANAGER OR MANAGING MEMBER

ADDRESS

CITY

STATE

ZIP CODE

 SALT LAKE CITY UTNAME

MANAGER OR MANAGING MEMBER

ADDRESS

CITY

STATE

ZIP CODE

NAME

MANAGER OR MANAGING MEMBER

ADDRESS

CITY

STATE

ZIP CODE

NAME

MANAGER OR MANAGING MEMBER

ADDRESS

CITY

STATE

ZIP CODE

None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

 PAUL J NELSONSignature of Manager, Managing Member or
Other Authorized SignatureTitle
CEO
Date
5/31/2017 7:49:30 AMNevada Secretary of State List Manager
Revised: 7-1-15

SDKD-NSS-000000000002

INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE BUSINESS LICENSE APPLICATION OF:

BEDROCK PROTECTION AGENCY LLC

NAME OF LIMITED-LIABILITY COMPANY

FOR THE FILING PERIOD OF **JUN, 2016** TO **JUN, 2017**

ENTITY NUMBER

E0314582015-8



100403

USE BLACK INK ONLY - DO NOT HIGHLIGHT

****YOU MAY FILE THIS FORM ONLINE AT www.nvsliverflume.gov****

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all manager or managing members. A Manager, or if none, a Managing Member of the LLC must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**

2. If there are additional managers or managing members, attach a list of them to this form.

3. Return completed form with the fee of \$150.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5. Make your check payable to the Secretary of State.

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ANNUAL LIST FILING FEE: \$150.00 LATE PENALTY: \$75.00 (if filing late)**BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late)**

Filed in the Office of <i>Barbara K. Cognate</i>	Business Number E0314582015-8
	Filing Number 20160149687-84
Secretary of State	Filed On 04/01/2016
State Of Nevada	Number of Pages 1

(This document was filed electronically.)
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW****NRS 76.020 Exemption Codes**

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

NAME

PAUL J NELSON

MANAGER OR MANAGING MEMBER

ADDRESS

CITY

STATE ZIP CODE

SALT LAKE CITY

UT

NAME

MANAGER OR MANAGING MEMBER

ADDRESS

CITY

STATE ZIP CODE

NAME

MANAGER OR MANAGING MEMBER

ADDRESS

CITY

STATE ZIP CODE

NAME

MANAGER OR MANAGING MEMBER

ADDRESS

CITY

STATE ZIP CODE

None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

 PAUL J NELSON

Title: **MANAGING MEMBER** Date: **4/1/2016 7:42:47 AM**

Signature of Manager, Managing Member or Other Authorized SignatureNevada Secretary of State List Manager
Revised: 7-1-15

SDKD-NSS-000000000002

INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE BUSINESS LICENSE APPLICATION OF:

BEDROCK PROTECTION AGENCY LLC

NAME OF LIMITED-LIABILITY COMPANY

FOR THE FILING PERIOD OF **JUN, 2015** TO **JUN, 2016**

USE BLACK INK ONLY - DO NOT HIGHLIGHT

****YOU MAY FILE THIS FORM ONLINE AT www.nvsliverflume.gov****

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

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3. Return completed form with the fee of \$150.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5. Make your check payable to the Secretary of State.

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ANNUAL LIST FILING FEE: \$150.00 LATE PENALTY: \$75.00 (if filing late)**BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late)**

Filed in the Office of <i>Barbara K. Cognate</i>	Business Number E0314582015-8
	Filing Number 20150324665-24
Secretary of State	Filed On 07/16/2015
State Of Nevada	Number of Pages 1

(This document was filed electronically.)
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

NRS 76.020 Exemption Codes

001 - Governmental Entity
005 - Motion Picture Company
006 - NRS 680B.020 Insurance Co.

NAME
PAUL J NELSONADDRESS
MANAGER OR MANAGING MEMBERCITY
SALT LAKE CITYSTATE ZIP CODE
UT NAME
MANAGER OR MANAGING MEMBERCITY
STATE ZIP CODE
NAME
MANAGER OR MANAGING MEMBERCITY
STATE ZIP CODE
NAME
MANAGER OR MANAGING MEMBERCITY
STATE ZIP CODE

None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X PAUL J NELSON**Signature of Manager, Managing Member or
Other Authorized Signature**Title
PRESIDENT Date
7/16/2015 12:27:07 PMNevada Secretary of State List Manager
Revised: 7-1-15

SDKD-NSS-000000000002



050303



BARBARA K. CEGAVSKE
Secretary of State
202 North Carson Street
Carson City, Nevada 89701-4201
(775) 684-5708
Website: www.nvsos.gov

Application for Registration of Foreign Limited-Liability Company

(PURSUANT TO NRS 86.544)

Filed in the Office of <i>Barbara K. Cegavske</i>	Business Number E0314582015-8
Secretary of State	Filing Number 20150289840-99
State Of Nevada	Filed On 06/25/2015
	Number of Pages 2

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Foreign Limited-Liability Company:	Bedrock Protection Agency LLC			<input type="checkbox"/> Check box if a Series Limited-Liability Company
2. Name Being Registered with Nevada: (see instructions)	The name under which this foreign limited-liability company proposes to register and transact business in Nevada is: Bedrock Protection Agency LLC			
3. Entity Domicile: (date and state or country of formation)	April 1, 2013 Date Formed	Utah State or Country where Authorized	<input checked="" type="checkbox"/> This entity is in good standing in the jurisdiction of its incorporation/creation.	
4. Registered Agent for Service of Process: (check only one box)	<input type="checkbox"/> Commercial Registered Agent: <input type="checkbox"/> Noncommercial Registered Agent (name and address below)			
	Name OR <input checked="" type="checkbox"/> Office or Position with Entity (name and address below)			
	Las Vegas Area Manager			
	Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity			
	1135 S Eastern Avenue, Suite 150 Street Address	Henderson City	Nevada 89052 Zip Code	Nevada
	Mailing Address (if different from street address) City Zip Code			
	In the event the above-designated Agent for Service of Process resigns and is not replaced or the agent's authority has been revoked or the agent cannot be found or served with exercise of reasonable diligence, then the Secretary of State is hereby appointed as the Agent for Service of Process.			
5. Records Office: (see instructions)	6076 S 900 E, Suite 100 Street Address	Salt Lake City City	UT 84121 State Zip Code	
6. Street Address of Principal Office: (or office required to be maintained in the domicile state by the laws of that state)	6076 S 900 E, Suite 100 Street Address	Salt Lake City City	UT 84121 State Zip Code	
7. Name and Address of each Manager or Member: (attach additional page if more than 1)	Paul J Nelson Name [REDACTED] Street Address	Lehi City	UT [REDACTED] State Zip Code	
8. Name and Signature of Manager or Member:	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. <input checked="" type="checkbox"/> <i>Paul J Nelson</i> Authorized Signature			
9. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity. <input checked="" type="checkbox"/> <i>Paul J Nelson</i> Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity			
This form must be accompanied by appropriate fees.				
June 25, 2015 Date				



180304



BARBARA K. CEGAVSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov

Registered Agent Acceptance

(PURSUANT TO NRS 77.310)

This form may be submitted by: a Commercial Registered Agent, Noncommercial Registered Agent or Represented Entity. For more information please visit <http://www.nvsos.gov/index.aspx?page=141>

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

Certificate of Acceptance of Appointment by Registered Agent

In the matter of Bedrock Protection Agency LLC

Name of Represented Business Entity

I, Paul J Nelson

am a:

Name of Appointed Registered Agent OR Represented Entity Serving as Own Agent*

(complete only one)

- a) commercial registered agent listed with the Nevada Secretary of State,
- b) noncommercial registered agent with the following address for service of process:

Street Address	City	Nevada	Zip Code
----------------	------	--------	----------

Mailing Address (if different from street address)	City	Nevada	Zip Code
--	------	--------	----------

- c) represented entity accepting own service of process at the following address:

Las Vegas Area Manager	City	Nevada	Zip Code
------------------------	------	--------	----------

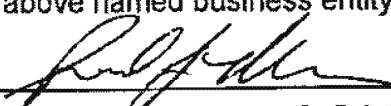
Title of Office or Position of Person in Represented Entity	City	Nevada	Zip Code
---	------	--------	----------

11135 S Eastern Avenue, Suite 150	City	Nevada	89052
-----------------------------------	------	--------	-------

Street Address	City	Nevada	Zip Code
----------------	------	--------	----------

Mailing Address (if different from street address)	City	Nevada	Zip Code
--	------	--------	----------

and hereby state that on June 25, 2015 I accepted the appointment as registered agent for the above named business entity.

X 
 Authorized Signature of R.A. or On Behalf of R.A. Company

June 25, 2015

Date

*If changing Registered Agent when reinstating, officer's signature required.

X
 Signature of Officer

Date

Nevada Secretary of State Form RA Acceptance
 Revised: 1-5-15

BARBARA K. CEGAVSKE
Secretary of State

STATE OF NEVADA



KIMBERLEY PERONDI
Deputy Secretary for
Commercial Recordings

**OFFICE OF THE
SECRETARY OF STATE**

Commercial Recordings Division

202 N. Carson Street
Carson City, NV 89701
Telephone (775) 684-5708
Fax (775) 684-7138

North Las Vegas City Hall
2250 Las Vegas Blvd North, Suite 400
North Las Vegas, NV 89030
Telephone (702) 486-2880
Fax (702) 486-2888

Certified Copy

11/25/2020 08:43:06 AM

Work Order Number: W2020112500324 - 960170
Reference Number: 20201062038
Through Date: 11/25/2020 08:43:06 AM
Corporate Name: BEDROCK SPECIAL PROJECTS
GROUP LLC

The undersigned filing officer hereby certifies that the attached copies are true and exact copies of all requested statements and related subsequent documentation filed with the Secretary of State's Office, Commercial Recordings Division listed on the attached report.

Document Number	Description	Number of Pages
20200568064	Annual List - 03/25/2020	2
20190225174-63	Annual List - 05/24/2019	1
20180141452-38	Initial List - 03/29/2018	1
20180141451-27	Articles of Organization - 03/29/2018	1



Respectfully,

BARBARA K. CEGAVSKE
Nevada Secretary of State

Certified By: Electronically Certified

Certificate Number: B202011251234669

You may verify this certificate

online at <http://www.nvsos.gov>



BARBARA K. CEGAVSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov
www.nvsilverflume.gov

Annual or Amended List and State Business License Application

ANNUAL AMENDED (check one)

List of Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers:

BEDROCK SPECIAL PROJECTS GROUP LLC

NAME OF ENTITY

NV20181223912

Entity or Nevada Business
Identification Number (NVID)

TYPE OR PRINT ONLY - USE DARK INK ONLY - DO NOT HIGHLIGHT

IMPORTANT: Read instructions before completing and returning this form.

Please indicate the entity type (check only one):

Corporation
 This corporation is publicly traded, the Central Index Key number is:

Nonprofit Corporation (see nonprofit sections below)

Limited-Liability Company

Limited Partnership

Limited-Liability Partnership

Limited-Liability Limited Partnership

Business Trust

Corporation Sole

Filed in the Office of <i>Barbara K. Cegavske</i>	Business Number E0155172018-9
	Filing Number 20200568064
Secretary of State State Of Nevada	Filed On 03/25/2020 10:06:46 AM
	Number of Pages 2

Additional Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers, may be listed on a supplemental page.

CHECK ONLY IF APPLICABLE

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee.

001 - Governmental Entity
 006 - NRS 680B.020 Insurance Co, provide license or certificate of authority number

For nonprofit entities formed under NRS chapter 80: entities without 501(c) nonprofit designation are required to maintain a state business license, the fee is \$200.00. Those claiming an exemption under 501(c) designation must indicate by checking box below.

Pursuant to NRS Chapter 76, this entity is a 501(c) nonprofit entity and is exempt from the business license fee.
 Exemption Code 002

For nonprofit entities formed under NRS Chapter 81: entities which are Unit-owners' association or Religious, Charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C. § 501(c) are excluded from the requirement to obtain a state business license. Please indicate below if this entity falls under one of these categories by marking the appropriate box. If the entity does not fall under either of these categories please submit \$200.00 for the state business license.

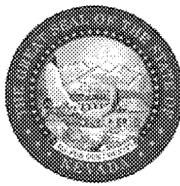
Unit-owners' Association Religious, charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C. § 501(c)

For nonprofit entities formed under NRS Chapter 82 and 80: Charitable Solicitation Information - check applicable box

Does the Organization intend to solicit charitable or tax deductible contributions?

No - no additional form is required
 Yes - the "Charitable Solicitation Registration Statement" is required.
 The Organization claims exemption pursuant to NRS 82A.210 - the "Exemption From Charitable Solicitation Registration Statement" is required

****Failure to include the required statement form will result in rejection of the filing and could result in late fees.****



BARBARA K. CEGAVSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov
www.nvsilverflume.gov

**Annual or Amended List
 and State Business License
 Application - Continued**

Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers:

CORPORATION, INDICATE THE MANAGING MEMBER:

PAUL NELSON

Name

1633 W Innovation Way, 5th Floor

Address

USA

Country

Lehi

UT

84043

State

Zip/Postal Code

None of the officers and directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

Paul Nelson

Managing Member

03/25/2020

Title

Date

Signature of Officer, Manager, Managing Member,
 General Partner, Managing Partner, Trustee,
 Subscriber, Member, Owner of Business,
 Partner or Authorized Signer FORM WILL BE RETURNED IF

UNSigned

INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE BUSINESS LICENSE APPLICATION OF:

BEDROCK SPECIAL PROJECTS GROUP LLC

NAME OF LIMITED-LIABILITY COMPANY

ENTITY NUMBER

E0155172018-9

FOR THE FILING PERIOD OF TO

100403

USE BLACK INK ONLY - DO NOT HIGHLIGHT

****YOU MAY FILE THIS FORM ONLINE AT www.nvsilverflume.gov****

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all manager or managing members. A **Manager**, or if none, a **Managing Member** of the LLC must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional managers or managing members, attach a list of them to this form.
3. Return completed form with the fee of \$150.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A **copy fee of \$2.00 per page** is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

ANNUAL LIST FILING FEE: \$150.00 LATE PENALTY: \$75.00 (if filing late)

BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late)

Filed in the Office of <i>Barbara K. Cognate</i>	Business Number E0155172018-9
	Filing Number 20190225174-63
Secretary of State	Filed On 05/24/2019
State Of Nevada	Number of Pages 1

(This document was filed electronically.)
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW****NRS 76.020 Exemption Codes**

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

001 - Governmental Entit
006 - NRS 680B.020 Insurance Co.**NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**

NAME

PAUL J NELSON

MANAGER OR MANAGING MEMBER

ADDRESS

CITY

STATE ZIP CODE

SALT LAKE CITY

UT

NAME

MANAGER OR MANAGING MEMBER

ADDRESS

CITY

STATE ZIP CODE

NAME

MANAGER OR MANAGING MEMBER

ADDRESS

CITY

STATE ZIP CODE

NAME

MANAGER OR MANAGING MEMBER

ADDRESS

CITY

STATE ZIP CODE

None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

 PAUL J NELSON

Title

MANAGING MEMBER

Date

5/24/2019 1:41:27 PM

Signature of Manager, Managing Member or Other Authorized SignatureNevada Secretary of State List ManorMem
Revised: 7-1-17

SDKD-NSS-0000000003

INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE BUSINESS LICENSE APPLICATION OF:

BEDROCK SPECIAL PROJECTS GROUP LLC

NAME OF LIMITED-LIABILITY COMPANY

FOR THE FILING PERIOD OF TO

ENTITY NUMBER

E0155172018-9



100403

USE BLACK INK ONLY - DO NOT HIGHLIGHT

YOU MAY FILE THIS FORM ONLINE AT www.nvsilverflume.gov

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all manager or managing members. A Manager, or if none, a Managing Member of the LLC must sign the form. FORM WILL BE RETURNED IF UNSIGNED.
2. If there are additional managers or managing members, attach a list of them to this form.
3. Return completed form with the fee of \$150.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

Filed in the Office of <i>Barbara K. Leggate</i>	Business Number E0155172018-9
Secretary of State	Filing Number 20180141452-38
State Of Nevada	Filed On 03/29/2018
	Number of Pages 1

(This document was filed electronically.)
ABOVE SPACE IS FOR OFFICE USE ONLY

ANNUAL LIST FILING FEE: \$150.00 LATE PENALTY: \$75.00 (if filing late)

BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late)

CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**NRS 76.020 Exemption Codes**

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

001 - Governmental Entit
006 - NRS 680B.020 Insurance Co.**NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

NAME

NELSON HOLDINGS LLC

MANAGER OR MANAGING MEMBER

ADDRESS

6076 S 900 EAST, SUITE 100

CITY

STATE

ZIP CODE

SALT LAKE CITY

UT

84121

NAME

JT BUSINESS INVESTMENTS LLC

MANAGER OR MANAGING MEMBER

ADDRESS

6076 S 900 EAST, SUITE 100

CITY

STATE

ZIP CODE

SALT LAKE CITY

UT

84121

NAME

MANAGER OR MANAGING MEMBER

ADDRESS

CITY

STATE

ZIP CODE

NAME

MANAGER OR MANAGING MEMBER

ADDRESS

CITY

STATE

ZIP CODE

None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

 PAUL J NELSONTitle
MANAGING MEMBER Date
3/29/2018 8:34:48 AM**Signature of Manager, Managing Member or Other Authorized Signature**Nevada Secretary of State List ManorMem
Revised: 7-1-17

SDKD-NSS-0000000003



BARBARA K. CEGAVSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov

050106

Articles of Organization Limited-Liability Company

(PURSUANT TO NRS CHAPTER 86)

(This

Filed in the Office of 	Business Number E0155172018-9
Filing Number 20180141451-27	
Filed On 03/29/2018	
Number of Pages 1	

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Limited-Liability Company: (must contain approved limited-liability company wording; see instructions)	BEDROCK SPECIAL PROJECTS GROUP LLC			<input type="checkbox"/> Check box if a Series Limited-Liability Company	<input type="checkbox"/> Check box if a Restricted Limited-Liability Company
2. Registered Agent for Service of Process: (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: SHUMWAY VAN LLC Name <input type="checkbox"/> Noncommercial Registered Agent (name and address below) OR <input type="checkbox"/> Office or Position with Entity (name and address below)				
				Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity <div style="display: flex; justify-content: space-between;"> <div>Street Address</div> <div>City</div> <div>Nevada</div> </div> <div style="display: flex; justify-content: space-between;"> <div>Zip Code</div> </div> <div style="display: flex; justify-content: space-between;"> <div>Mailing Address (if different from street address)</div> <div>City</div> <div>Nevada</div> </div> <div style="display: flex; justify-content: space-between;"> <div>Zip Code</div> </div>	
3. Dissolution Date: (optional)	Latest date upon which the company is to dissolve (if existence is not perpetual):				
4. Management: (required)	Company shall be managed by: <input type="checkbox"/> Manager(s) OR <input checked="" type="checkbox"/> Member(s) (check only one box)				
5. Name and Address of each Manager or Managing Member: (attach additional page if more than 3)	1) NELSON HOLDINGS LLC Name 6076 S 900 EAST, SUITE 100 SALT LAKE CITY UT 84121 Street Address City State Zip Code 2) JT BUSINESS INVESTMENTS LLC Name 6076 S 900 EAST, SUITE 100 SALT LAKE CITY UT 84121 Street Address City State Zip Code 3) SHUMWAY VAN LLC Name 8985 S EASTERN AVE. SUITE 100 LAS VEGAS, USA US 89123 Street Address City State Zip Code				
6. Name, Address and Signature of Organizer: (attach additional page if more than 1 organizer)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. SHUMWAY VAN LLC X SHUMWAY VAN LLC Name 8985 S EASTERN AVE. SUITE 100 LAS VEGAS, USA US 89123 Address City State Zip Code				
7. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity. X SHUMWAY VAN LLC 3/29/2018 Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity				

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 86 DLLC Articles
 Revised: 10-1-15

SDKD-NSS-000000000003